

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>9-4-96</u>		2 Serial/Patent # <u>08/635130</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
<input checked="" type="checkbox"/>	Filing		\$ <u>70</u>
	Amendment		\$
	Extension of Time		\$
	Notice of Appeal/Appeal		\$
	Petition		\$
	Issue		\$
	Cert of Correction/Terminal Disc.		\$
	Maintenance		\$
	Assignment		\$
	Other		\$
		7 TOTAL AMOUNT OF REFUND	
		\$ <u>70</u>	
10 REASON:		8 TO BE REFUNDED BY:	
		Treasury Check	
		<input checked="" type="checkbox"/> Credit Deposit A/C #: <u>07--0630</u>	
<input checked="" type="checkbox"/> Overpayment <input type="checkbox"/> Duplicate Payment <input type="checkbox"/> No Fee Due (Explanation):			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>D. STEY</u>		TITLE: <u>EXAMINER</u>	
SIGNATURE: <u>D. Stey</u>		PHONE: <u>308-0591</u>	
OFFICE: <u>IPED</u>			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: <u>Shao Lon</u>		DATE: <u>9/25/96</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B

ID	MCH	TPE	NAME OR ACCOUNT	C-NBR	MLEDTE	CURDTE	F-C	\$ AMOUNT
D	070	1	070630	07135	960419	960501	101	1,472.00
D	080	1	070630	08071	960711	960715	581	40.00
D	230	1	070630	23189	960711	960716	105	130.00

NO MORE TRANSACTIONS

END OF YOUR QUERY